

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

ADDRESS (number and street) ▼

PO Box 150064

☐ Check if different than previously reported. (ACC)

Grand Rapids

MI

49515

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00402800

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

01

2015

07

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kimberly Buchan

Signature of Treasurer

Kimberly Buchan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

08

20

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
07 / 31 / 2015

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|--|---|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015 | | 25793.85 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 34860.63 | |
| (c) Total Receipts (from Line 19) | 32457.39 | 190434.51 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 67318.02 | 216228.36 |
| 7. Total Disbursements (from Line 31) | 38323.33 | 187233.67 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 28994.69 | 28994.69 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 07 / 31 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7846.50

44127.67

(ii) Unitemized

19519.64

105582.46

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

27366.14

149710.13

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

27366.14

149710.13

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

91.25

224.38

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

5000.00

40500.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

5000.00

40500.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

32457.39

190434.51

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

27457.39

149934.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 5000.00 | 40500.00 |
| (ii) Non-Federal Share..... | 5000.00 | 40500.00 |
| (b) Other Federal Operating Expenditures | 16964.62 | 84738.87 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 26964.62 | 165738.87 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 250.00 |
| 24. Independent Expenditures (use Schedule E) | 10778.71 | 19330.50 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 580.00 | 1914.30 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 580.00 | 1914.30 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 38323.33 | 187233.67 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 33323.33 | 146733.67 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 27366.14 | 149710.13 |
| 34. Total Contribution Refunds (from Line 28(d)) | 580.00 | 1914.30 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 26786.14 | 147795.83 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 21964.62 | 125238.87 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 91.25 | 224.38 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 21873.37 | 125014.49 |

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XN

Transaction ID :

All donors with addresses outside of the country are US citizens. This organization is operated by staff (independent contractors) from their homes therefore no office space is rented or utilities required. Telephone and internet services, office equipment, supplies and salaries are the main administrative expenses incurred by this organization. A majority of our work is done through travel and events and over the internet. All expenses have been adequately disclosed.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 84

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Allan Affeldt

Mailing Address 303 E. 2nd Str.

City State Zip Code
Winslow AZ 86047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Monastery Hotels Llc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2015

Transaction ID : SA11Al.134188

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Kurt Bateman

Mailing Address 498 Enfield Road

City State Zip Code
Columbus OH 43209-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer
Span Ohio

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2015

Transaction ID : SA11Al.134189

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. William Bianchi

Mailing Address 4141 N. Paulina

City State Zip Code
Chicago IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cetrus Belt Teachers Assn.

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2015

Transaction ID : SA11Al.134400

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. William Bianchi

Mailing Address 4141 N. Paulina

City State Zip Code
Chicago IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cetrus Belt Teachers Assn.

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

07 / 16 / 2015

Transaction ID : SA11AI.134141

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. William Bianchi

Mailing Address 4141 N. Paulina

City State Zip Code
Chicago IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cetrus Belt Teachers Assn.

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

07 / 21 / 2015

Transaction ID : SA11AI.134527

Amount of Each Receipt this Period

110.00

Full Name (Last, First, Middle Initial)

C. Amrita Burdick

Mailing Address 4528 Wyoming St.

City State Zip Code
Kansas City MO 64111

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Missouri-Kansas

Occupation

Medical Librarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

07 / 17 / 2015

Transaction ID : SA11AI.134156

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

190.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. merchandise sales Cash

Mailing Address PO Box 150064

City State Zip Code
Grand Rapids MI 49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11AI.134532

Amount of Each Receipt this Period

135.50

Full Name (Last, First, Middle Initial)

B. Green Party Cash Donation

Mailing Address 422 E. 450 Rd.

City State Zip Code
Morrisonville IL 62546

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2015

Transaction ID : SA11AI.134469

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

C. White Party Cash Donation

Mailing Address 871 Alder St.

City State Zip Code
Corona CA 92879

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2015

Transaction ID : SA11AI.134579

Amount of Each Receipt this Period

378.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

838.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. WI Convention Cash Donation

Mailing Address 1721 W. Canal St.

City State Zip Code
 Milwaukee WI 53233

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11AI.134544

Amount of Each Receipt this Period

695.00

Full Name (Last, First, Middle Initial)

B. Netroots Nation Cash donations

Mailing Address Phoenix Convention Center
 100 N. 3rd St.

City State Zip Code
 Phoenix AZ 85004

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11AI.134559

Amount of Each Receipt this Period

698.00

Full Name (Last, First, Middle Initial)

C. Janice Cederstrom

Mailing Address 834 Chestnut Street Suite T-140

City State Zip Code
 Philadelphia PA 19107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11AI.134333

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1643.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

 FOR LINE NUMBER: PAGE 11 OF 84
 (check only one)

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Dorothy Chapman

Mailing Address 2121 Hill Street

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Santa Monica | CA | 90405 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 07 | / | 2015 |

Transaction ID : SA11AI.133849

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Jeffrey L. Cox

Mailing Address 112 S. Dodge St.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Iowa City | IA | 52240 |

FEC ID number of contributing federal political committee.

C

Name of Employer

University of Iowa

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

893.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 13 | / | 2015 |

Transaction ID : SA11AI.134082

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ronald Culver

Mailing Address 240 Manning Blvd

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Albany | NY | 12206 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 03 | / | 2015 |

Transaction ID : SA11AI.133641

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

155.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Allen Davis

Mailing Address 818 E. Pleasant St.

City State Zip Code
Amherst MA 01002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : SA11AI.133975

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Bobby Dawn Dershem

Mailing Address 1618 Elmhurst St.

City State Zip Code
Chula Vista CA 91913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2015

Transaction ID : SA11AI.134036

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Peter W. Deutsch

Mailing Address 153 Cherry Lane

City State Zip Code
Aliquippa PA 15001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : SA11AI.133980

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. john elliot

Mailing Address 860 sutter st apt106

City
san franciscoState
CAZip Code
94109FEC ID number of contributing
federal political committee.

C

Name of Employer

Awaiting response from donor

Occupation

Awaiting response from donor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 4 | | 2 | 0 | 1 | 5 |

Transaction ID : SA11Al.134285

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mike Fadel

Mailing Address 133 Commander Shea Blvd #706

City
QuincyState
MAZip Code
02171FEC ID number of contributing
federal political committee.

C

Name of Employer

Inquiring

Occupation

Inquiring

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 8 | | 2 | 0 | 1 | 5 |

Transaction ID : SA11Al.134551

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Harvey Fernbach

Mailing Address 6201 Greenbelt Rd, Ste. U18

City
Berwyn HeightsState
MDZip Code
20740FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 7 | | 2 | 0 | 1 | 5 |

Transaction ID : SA11Al.133858

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Harvey Fernbach

Mailing Address 8600 Split Oak Circle

City State Zip Code
 Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 22 2015

Transaction ID : SA11AI.134259

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Harvey Fernbach

Mailing Address 6201 Greenbelt Rd, Ste. U18

City State Zip Code
 Berwyn Heights MD 20740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 30 2015

Transaction ID : SA11AI.134360

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Harvey Fernbach

Mailing Address 6201 Greenbelt Rd, Ste. U18

City State Zip Code
 Berwyn Heights MD 20740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 30 2015

Transaction ID : SA11AI.134361

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
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|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Chris Fisher

Mailing Address 1000 grant st unit 1204

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Denver | CO | 80203 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Labor Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 29 | / | 2015 |

Transaction ID : SA11AI.134347

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Lisa Franzen

Mailing Address 13 Calle Pinon

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Placitas | NM | 87043 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

951.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 13 | / | 2015 |

Transaction ID : SA11AI.134091

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Russell Freedman

Mailing Address PO Box 98

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lanesboro | MA | 01237 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SecondLife Books

Bookseller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.92

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 21 | / | 2015 |

Transaction ID : SA11AI.134539

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Russell Freedman

Mailing Address PO Box 98

City State Zip Code
 Lanesboro MA 01237

FEC ID number of contributing
federal political committee.

C

Name of Employer

SecondLife Books

Occupation

Bookseller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11AI.134589

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. Fritzie Gaccione

Mailing Address 9801 Collins Ave 10R

City State Zip Code
 Bal Harbour FL 33154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 06 / 2015

Transaction ID : SA11AI.133819

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. jaime garfield

Mailing Address 113 campbell st.

City State Zip Code
 SANTA CRUZ CA 95060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Staff of Life Natural Foods

Occupation

Retail

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 11 / 2015

Transaction ID : SA11AI.134039

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Shirley Golub

Mailing Address 2916 Frye St.

City State Zip Code
 Oakland CA 94602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Real Estate Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11AI.134335

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Robert Gonzalez

Mailing Address 2407 amapola drive

City State Zip Code
 davis CA 95616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CA State Government

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 07 / 2015

Transaction ID : SA11AI.133862

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael Gordy

Mailing Address 4401 E. Blacklidge Dr.

City State Zip Code
 Tucson AZ 85712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 01 / 2015

Transaction ID : SA11AI.133592

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Robert Greenberg

Mailing Address 745 W. Meadowlark Lane

City State Zip Code
Corrales NM 87048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SA11AI.134348

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Pamela S. Gronemeyer

Mailing Address 34 Kingsley Way

City State Zip Code
Glen Carbon IL 62034

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SA11AI.134362

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Dr. Van Hamilton

Mailing Address 1432 Mountain View Rd

City State Zip Code
Santa Barbara CA 93109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2015

Transaction ID : SA11AI.134146

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Cecily Hunt

Mailing Address 2644 Brassie Ave.

City State Zip Code
Flossmoor IL 60422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Donation was refunded

Donation was refunded

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 04 / 2015

Transaction ID : SA11AI.133579

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kelley Johnson

Mailing Address 271 North Road
Box 94

City State Zip Code
Hampden MA 01036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : SA11AI.133990

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. David Kelley

Mailing Address 5535 Champion Creek Blvd.

City State Zip Code
Medina OH 44256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Kelley Shulmond & Co.

Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : SA11AI.133991

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Mimi Kennedy

Mailing Address 16133 Ventura Bl. Suite 520

City State Zip Code
Encino CA 91436

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollygreen Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11AI.134247

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Mimi Kennedy

Mailing Address 6535 Langdon Ave

City State Zip Code
Van Nuys CA 91406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollygreen Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA11AI.134337

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mimi Kennedy

Mailing Address 6535 Langdon Ave

City State Zip Code
Van Nuys CA 91406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollygreen Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA11AI.134338

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Sallie Kladnik

Mailing Address 3530 N. Monte Vista Dr.

City State Zip Code
Flagstaff AZ 86004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : SA11AI.134169

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mark Lacelle-Peterson

Mailing Address 7357 Campus Heights Rd.

City State Zip Code
Houghton NY 14744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Teacher Ed. Accred. Council

Researcher & Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2015

Transaction ID : SA11AI.134312

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jim Lefebvre

Mailing Address 3041 Quebec Ave. South

City State Zip Code
St. Louis Park MN 55426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2015

Transaction ID : SA11AI.134415

Amount of Each Receipt this Period

155.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Marc Levin

Mailing Address 320 Franklin Ave.

City State Zip Code
Silver Spring MD 20901

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Sentencing Project

Occupation
Program Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11AI.134238

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Darlene Little

Mailing Address 9882 Spruce CT

City State Zip Code
Cypress CA 90630-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress College

Occupation
Lecturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2015

Transaction ID : SA11AI.134665

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mary Ellen Marino

Mailing Address 9 Hornor Lane

City State Zip Code
Princeton NJ 08540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 04 / 2015

Transaction ID : SA11AI.133764

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Nancy McLure

Mailing Address 9 Bodnar St.

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Bernardsville | NJ | 07924 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | 0 | 8 | | 2 | 0 | 1 | 5 | | |

Transaction ID : SA11Al.133920

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Nancy McLure

Mailing Address 9 Bodnar St.

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Bernardsville | NJ | 07924 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | 1 | 2 | | 2 | 0 | 1 | 5 | | |

Transaction ID : SA11Al.134069

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dan O'Neal

Mailing Address 3731 E. Redfield Rd

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Gilbert | AZ | 85234-3112 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | 2 | 2 | | 2 | 0 | 1 | 5 | | |

Transaction ID : SA11Al.134261

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Denis O'Neal

Mailing Address 431 Valley Oak Drive

City State Zip Code
Morgan Hill CA 95037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

Transaction ID : SA11AI.133599

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Denis O'Neal

Mailing Address 431 Valley Oak Drive

City State Zip Code
Morgan Hill CA 95037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2015

Transaction ID : SA11AI.133698

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Eva Putzova

Mailing Address 700 N. Magma Way

City State Zip Code
Flagstaff AZ 86001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Northern Arizona University

Director, Policy Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2015

Transaction ID : SA11AI.133796

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Chuck Reutter

Mailing Address 29066 Bradley Rd.

City State Zip Code
 Menifee CA 92586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11AI.134591

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Vernon Sandin

Mailing Address 146 New Mark Esplanade

City State Zip Code
 Rockville MD 20850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 04 / 2015

Transaction ID : SA11AI.133775

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Aleatha Scholer

Mailing Address 10408 Ridgecircle Dr NW

City State Zip Code
 Albuquerque NM 87114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 29 / 2015

Transaction ID : SA11AI.134355

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 84
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Randolph Shannon

Mailing Address 600 13th Ave.

City State Zip Code
New Brighton PA 15066

FEC ID number of contributing
federal political committee.

C

Name of Employer

PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2046.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : SA11AI.134009

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Eve Shapiro

Mailing Address 5373 N. Via Alcalde

City State Zip Code
Tucson AZ 85718

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2015

Transaction ID : SA11AI.134266

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Linda Sleffel

Mailing Address 2407 McCauley Court

City State Zip Code
Columbus OH 43220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2015

Transaction ID : SA11AI.134074

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Linda Sleffel

Mailing Address 2407 McCauley Court

City State Zip Code
Columbus OH 43220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2015

Transaction ID : SA11Al.134218

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. David Sonneborn

Mailing Address 1183 N. Navarro Pl

City State Zip Code
Orange CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2015

Transaction ID : SA11Al.134135

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Lana Spight

Mailing Address 17621 Creek Ridge Pass

City State Zip Code
Minnetonka MN 55345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2015

Transaction ID : SA11Al.134676

Amount of Each Receipt this Period

190.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Lana Spight

Mailing Address 17621 Creek Ridge Pass

City State Zip Code
Minnetonka MN 55345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SA11AI.134765

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

B. Paul Stokes

Mailing Address PO Box 218

City State Zip Code
Tucson AZ 12345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11AI.134751

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Paul Stokes

Mailing Address PO Box 218

City State Zip Code
Tucson AZ 12345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2015

Transaction ID : SA11AI.134318

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 84
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. James Swanson

Mailing Address 2221 W Hubbard St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60612 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Design Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 10 | / | 2015 |

Transaction ID : SA11AI.134015

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. James Swanson

Mailing Address 2221 W Hubbard St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60612 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Design Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 16 | / | 2015 |

Transaction ID : SA11AI.134151

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Kevin Sweeney

Mailing Address 302 Trelawne Dr.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Rochester | NY | 14622 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Marketer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 03 | / | 2015 |

Transaction ID : SA11AI.133726

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ▶

140.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Kevin Sweeney

Mailing Address 302 Trelawne Dr.

City State Zip Code
Rochester NY 14622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Marketer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2015

Transaction ID : SA11AI.134729

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Alice Swift

Mailing Address 36 Pondview Drive

City State Zip Code
Amherst MA 01002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

None

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 08 / 2015

Transaction ID : SA11AI.133927

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Clare Tobin

Mailing Address 5858 N. Talman Ave.

City State Zip Code
Chicago IL 60659

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Wr Property Management, LLC

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11AI.134522

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Jennifer Tomkins

Mailing Address 27578 Hunters' Lane

City

Sycamore

State

IL

Zip Code

60178

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Interim Innkeeper

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | | | | | 1 | 0 | | | |

Transaction ID : SA11AI.134017

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Florence Vincent

Mailing Address P.O. Box 162

City

RAINIER

State

WA

Zip Code

98576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yelm Food Co-op

Occupation

Buyer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

575.00

Date of Receipt

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | | | | | 0 | 3 | | | |

Transaction ID : SA11AI.133732

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Richard Warner

Mailing Address 3100 Newport Ct

City

Arlington

State

TX

Zip Code

76015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SDS

Occupation

SW Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | | | | | 1 | 0 | | | |

Transaction ID : SA11AI.134019

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Tracy Waters

Mailing Address 14207 NW Newberry Road

City State Zip Code
 Portland OR 97231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Family Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11AI.134757

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tracy Waters

Mailing Address 14207 NW Newberry Road

City State Zip Code
 Portland OR 97231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Family Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11AI.134342

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Charlene Woodcock

Mailing Address 2355 Virginia Street

City State Zip Code
 Berkeley CA 94709-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2015

Transaction ID : SA11AI.133739

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

7846.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1765 3 Mile Rd. NE

City State Zip Code
 Grand Rapids MI 49505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 31 2015

Transaction ID : SA15.134921

Amount of Each Receipt this Period

81.15

Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.15

81.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Service Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2015
Transaction ID : SB21B.134613

Amount of Each Disbursement this Period

11.68

Full Name (Last, First, Middle Initial)

B. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Service Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2015
Transaction ID : SB21B.134640

Amount of Each Disbursement this Period

15.06

Full Name (Last, First, Middle Initial)

C. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Service Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 19 / 2015
Transaction ID : SB21B.134670

Amount of Each Disbursement this Period

28.07

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Service Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 26 2015
Transaction ID : SB21B.134736

Amount of Each Disbursement this Period

17.48

Full Name (Last, First, Middle Initial)

B. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 31 2015
Transaction ID : SB21B.134759

Amount of Each Disbursement this Period

17.96

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
In-air wifi

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 17 2015
Transaction ID : SB21B.134779

Amount of Each Disbursement this Period

9.99

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.43

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Three 7-segment displays are shown, each with a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third. The first display shows '07', the second shows '08', and the third shows '2015'. The displays are separated by slashes.

Category/
TypeCategory/
Type

87.59

Category/
Type

139.60

235.14

TOTAL This Period (last page this line number only).....

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Authorize.net

Category/
Type

145.25

State: District:

B. Bank of America

07 / 02 / 2015

Category/
Type

584.24

State: District:

C. Bank of America

Category/
Type

State: District:

749.49

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Bank of America

Date of Disbursement

Mailing Address 100 N. Tryon St.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Charlotte | NC | 28255 |

Transaction ID : SB21B.134791

| Purpose of Disbursement |
|-------------------------|
| ATM Fee |

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Bank of America

Date of Disbursement

Mailing Address 100 N. Tryon St.

07 / 16 / 2015

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Charlotte | NC | 28255 |

Transaction ID : SB21B.134792

| Purpose of Disbursement | ATM Fee |
|-------------------------|---------|
| ATM Fee | |

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

State: District:

Full Name (Last, First, Middle Initial)

C. Bank of America

Date of Disbursement

Mailing Address 100 N. Tryon St.

Three digital displays are shown, each with a grid of small squares above the numbers. The first display shows '07' with two squares above the '0' and two above the '7'. The second display shows '17' with one square above the '1' and one above the '7'. The third display shows '2015' with one square above each digit: '2', '0', '1', and '5'.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Charlotte | NC | 28255 |

Transaction ID : SB21B.134793

Purpose of Disbursement Chargeback

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

State: District:

SUBTOTAL of Disbursements This Page (optional).....

| Country | Percentage |
|---------|------------|
| 15.50 | |
| 15.00 | |
| 14.50 | |
| 14.00 | |
| 13.50 | |
| 13.00 | |
| 12.50 | |
| 12.00 | |
| 11.50 | |
| 11.00 | |
| 10.50 | |
| 10.00 | |
| 9.50 | |
| 9.00 | |
| 8.50 | |
| 8.00 | |
| 7.50 | |
| 7.00 | |
| 6.50 | |
| 6.00 | |
| 5.50 | |
| 5.00 | |
| 4.50 | |
| 4.00 | |
| 3.50 | |
| 3.00 | |
| 2.50 | |
| 2.00 | |
| 1.50 | |
| 1.00 | |
| 0.50 | |
| 0.00 | |

TOTAL This Period (last page this line number only).....

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Category/
TypeCategory/
Type

5.40

Category/
Type

100.00

125.40

TOTAL This Period (last page this line number only).....

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.134803

Original vendor did not exceed an aggregate of \$200. This expense was cash for taxis.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Steve Cobble

Mailing Address 609 Irving St. NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
July Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2015
Transaction ID : SB21B.134875

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Data Acqsys

Mailing Address 11606 Landview Lane

City Spotsylvania State VA Zip Code 22551

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2015
Transaction ID : SB21B.134804

Amount of Each Disbursement this Period

1260.00

Full Name (Last, First, Middle Initial)

C. Jeanne Dauray

Mailing Address 569 W. Seaton Dr.

City Round Lake State IL Zip Code 60073

Purpose of Disbursement
July Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2015
Transaction ID : SB21B.134829

Amount of Each Disbursement this Period

375.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2135.00

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| Age Group | Percentage |
|-----------|------------|
| 18-24 | 100.00 |
| 25-34 | 100.00 |
| 35-44 | 100.00 |
| 45-54 | 100.00 |
| 55-64 | 100.00 |
| 65-74 | 100.00 |
| 75-84 | 100.00 |
| 85+ | 150.00 |

07 / 21 / 2015

666.91

407.20

1224.11

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.134831**

Original vendor was Jan Schakowsky, PO Box 5130, Evanston, IL 60204 for \$150 on 5/8/15 for luncheon. Not related to a candidate.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.134833**

Original vendor was Expedia, 333 108th Ave. NE, Bellevue, WA 98004 for \$380.20 on 5/20/15 and \$27.00 on 5/20/2015 for travel to Netroots Nation.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Jeanne Dauray

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 2 | 1 | | 2 | 0 | 1 | 5 | | |

Mailing Address 569 W. Seaton Dr.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Round Lake | IL | 60073 |

Transaction ID : SB21B.134834Purpose of Disbursement
Reimbursement

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

142.76

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

B. Jeanne Dauray

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 2 | 1 | | 2 | 0 | 1 | 5 | | |

Mailing Address 569 W. Seaton Dr.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Round Lake | IL | 60073 |

Transaction ID : SB21B.134836Purpose of Disbursement
Reimbursement

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

410.23

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

C. Jeanne Dauray

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 3 | 0 | | 2 | 0 | 1 | 5 | | |

Mailing Address 569 W. Seaton Dr.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Round Lake | IL | 60073 |

Transaction ID : SB21B.134837Purpose of Disbursement
July Salary

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

375.00

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

SUBTOTAL of Disbursements This Page (optional)..... ►

927.99

TOTAL This Period (last page this line number only)..... ►

: 97 'A -G7 9 @ @ 5 B9 CI G 'H9 LH 'F9 @ 5 H98 'HC '5 'F9 DCF HZ G7 <98 I @ 'CF 'H9 A -N5 HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.134834**

Original vendor did not exceed an aggregate of \$200.00.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.134836**

Original vendors included Orbitz, 500 W. Madison St. Suite 1000, Chicago, IL 60661 for \$286.19 on 4/16/2015 for
airfare; American Airlines, PO Box 619616, DFW Airport, TX 75261 for \$25.00 on 5/10/15 for baggage fee. Other
vendors did not exceed an aggregate of \$200.00.

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Michael D. Fox

Date of Disbursement

Mailing Address 719 52nd St. N

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| St. Petersburg | FL | 33710 |

Transaction ID : SB21B.134850

| |
|-------------------------|
| Purpose of Disbursement |
| July Salary |

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

1000.00

Full Name (Last, First, Middle Initial)

B. Google Service Apps

Date of Disbursement

Mailing Address 1600 Amphitheatre Way

07 / 03 / 2015

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043 |

Transaction ID : SB21B.134824

| Purpose of Disbursement | Email Server |
|-------------------------|--------------|
| | |

Amount of Each Disbursement this Period

| Candidate Name | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 |
|----------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | |

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

62.50

Full Name (Last, First, Middle Initial)

C. Russell Greene

Date of Disbursement

Mailing Address 5011 Noeline Ave.

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '07' with two squares above it. The second display shows '14' with two squares above it. The third display shows '2015' with four squares above it.

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Encino | CA | 91436 |

Transaction ID : SB21B.134864

[illegible]

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

1500.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.134864

Original vendor was Green Plate Catering, 11307 Elkin St., Wheaton MD 20902 for \$1,500.00 on 5/8/15 for catering.

Form/Schedule:
Transaction ID:

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.134852

Advanced funds toward purchase of a new computer. This purchase has not been made. Will update with vendor information after purchase is complete.

Form/Schedule:
Transaction ID:

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| Age Group | Percentage |
|-----------|------------|
| 18-24 | 100% |
| 25-34 | 100% |
| 35-44 | 100% |
| 45-54 | 100% |
| 55-64 | 100% |
| 65-74 | 100% |
| 75-84 | 100% |
| 85+ | 100% |

Category/
Type

700.00

Category/
Type

Three digital displays are shown, each with a date format above the number. The first display shows '07' with 'M' and 'M' above it. The second display shows '14' with 'D' and 'D' above it. The third display shows '2015' with 'Y', 'Y', 'Y', and 'Y' above it. Each display has a small square above each digit.

Category/
Type

1125.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Christopher Miller

Mailing Address 11606 Landview Ln.

City Spotsylvania State VA Zip Code 22551

Purpose of Disbursement
July Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 30 2015
Transaction ID : SB21B.134798

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Quickbooks Online

Mailing Address online service - no address

City NA State CA Zip Code 00000

Purpose of Disbursement
Monthly Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 08 2015
Transaction ID : SB21B.134862

Amount of Each Disbursement this Period

32.14

Full Name (Last, First, Middle Initial)

C. Salsa Labs, Inc.

Mailing Address PO Box 674533

City Detroit State MI Zip Code 48267

Purpose of Disbursement
Membership Database Service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 27 2015
Transaction ID : SB21B.134865

Amount of Each Disbursement this Period

2200.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2382.14

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Deb Schrishuhn

Category/
Type

State: District:

B. Deb Schrishuhn

Category/
Type

250.00

State: District:

C. Sheraton - Phoenix

Category/
Type

651.16

State: District:

1151.16

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Donna Smith

Mailing Address 4502 N. Diamond Leaf Dr.

City Castle Rock State CO Zip Code 80109

Purpose of Disbursement
July Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2015
Transaction ID : SB21B.134815

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. Donna Smith

Mailing Address 4502 N. Diamond Leaf Dr.

City Castle Rock State CO Zip Code 80109

Purpose of Disbursement
July Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2015
Transaction ID : SB21B.134816

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

C. Swift Printing

Mailing Address 404 Bridge St. NW

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement
Business Cards

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2015
Transaction ID : SB21B.134879

Amount of Each Disbursement this Period

1117.61

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1267.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 0 | 6 | | | 2 | 0 | 1 | 5 | | |

Mailing Address 1765 3 Mile Rd. NE

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Grand Rapids | MI | 49505 |

Transaction ID : SB21B.134885Purpose of Disbursement
Postage

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

| | | | | |
|---|---|---|---|---|
| 1 | 9 | . | 6 | 0 |
|---|---|---|---|---|

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

B. USPS

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 0 | 7 | | | 2 | 0 | 1 | 5 | | |

Mailing Address 1765 3 Mile Rd. NE

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Grand Rapids | MI | 49505 |

Transaction ID : SB21B.134886Purpose of Disbursement
Postage

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

| | | | |
|---|---|---|---|
| 5 | . | 7 | 5 |
|---|---|---|---|

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

C. USPS

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 0 | 8 | | | 2 | 0 | 1 | 5 | | |

Mailing Address 1765 3 Mile Rd. NE

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Grand Rapids | MI | 49505 |

Transaction ID : SB21B.134887Purpose of Disbursement
Postage

Amount of Each Disbursement this Period

Candidate Name

| |
|-------------------|
| Category/ Type |
|-------------------|

| | | | | |
|---|---|---|---|---|
| 1 | 9 | . | 9 | 9 |
|---|---|---|---|---|

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

SUBTOTAL of Disbursements This Page (optional)..... ►

| | | | | |
|---|---|---|---|---|
| 4 | 5 | . | 3 | 4 |
|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ►

| | | | | |
|---|---|---|---|---|
| 4 | 5 | . | 3 | 4 |
|---|---|---|---|---|

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Verizon

Category/
Type

348.36

State: District:

B. Janet Wolff

Category/
Type

355.55

State: District:

C.

Category/
Type

State: District:

703.91

16125.53

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.134827

Original vendor was Best Buy, 6000 Northwest Highway 14, Crystal Lake, IL 60014 for \$355.55 on 5/28/15 for a new computer.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 84

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Cecily Hunt

Mailing Address 2644 Brassie Ave.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Flossmoor | IL | 60422 |

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 09 | | 2015 |

Transaction ID : SB28A.133581

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

B.

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

C.

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For:

| | |
|--|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|--------|
| 500.00 |
|--------|

| |
|--------|
| 500.00 |
|--------|

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 58 OF 84
FOR LINE 24 OF FORM 3X

| | | | | |
|---|--------------------|---|--|--|
| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00402800</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> | | | | |
| Full Name of Payee Collective Copy | | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 14 / 2015 | |
| Mailing Address 93 Main St. | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 60.00 | |
| City Florence | State MA | Zip Code 01062 | Transaction ID : SE.134800 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 14 / 2015 | |
| Purpose of Expenditure Flyers | | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 14848.20 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee JoAnn Conrad | | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 06 / 28 / 2015 | |
| Mailing Address 13 Red Oak Lane | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 546.33 | |
| City Springfeild | State IL | Zip Code 62712 | Transaction ID : SE.134924 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 08 / 2015 | |
| Purpose of Expenditure Reimbursement for food | | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div> | | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 9352.37 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 606.33 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 08 / 20 / 2015 | |
| [Electronically Filed] | | | | |

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SE
Transaction ID : SE.134924

Original vendor was Alexander's, 620 Bruns Ln., Springfield, IL 62701 for \$546.33 on 6/28/15 for food at an event to raise money for Progressive Vote to use toward promoting support for Bernie Sanders for President.

Form/Schedule:
Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 60 OF 84
FOR LINE 24 OF FORM 3X

| | | | | |
|---|--|---|--|--|
| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee Dem Store | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 10 / 2015 | |
| Mailing Address 5104 Macarthur Blvd. NW | | | Amount 1700.66 | |
| City Washington | | State DC | Zip Code 20016 | |
| Purpose of Expenditure T-shirts | | Category/Type 004 | Transaction ID : SE.134808 Date of Disbursement or Obligation MM / DD / YYYY 07 / 10 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 11108.43 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee Dem Store | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 24 / 2015 | |
| Mailing Address 5104 Macarthur Blvd. NW | | | Amount 3191.25 | |
| City Washington | | State DC | Zip Code 20016 | |
| Purpose of Expenditure T-shirts | | Category/Type 004 | Transaction ID : SE.134809 Date of Disbursement or Obligation MM / DD / YYYY 07 / 24 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19195.10 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 4891.91 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] Date MM / DD / YYYY 08 / 20 / 2015 | | |

SCHEDULE E (FEC Form 3X)
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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee Dr. Don's Buttons | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 13 / 2015 | |
| Mailing Address 3906 W. Morrow Drive | | | Amount 2004.63 | |
| City Glendale | State AZ | Zip Code 85308 | Transaction ID : SE.134818 | |
| Purpose of Expenditure Buttons and Bumper Stickers | | Category/ Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 13 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 13217.63 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee Gloo Factory | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 14 / 2015 | |
| Mailing Address PO Box 1212 | | | Amount 260.00 | |
| City Tucson | State AZ | Zip Code 85702 | Transaction ID : SE.134822 | |
| Purpose of Expenditure Flyers | | Category/ Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 14 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 15108.20 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 2264.63 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYY 08 / 20 / 2015 |

SCHEDULE E (FEC Form 3X)
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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | FEC IDENTIFICATION NUMBER ▼ C C00402800 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | |

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|---|--------------------|---|---|
| Full Name of Payee Minuteman Press | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 13 / 2015 | |
| Mailing Address 905 S. Neil St. Ste. B | | Amount 1203.29 | |
| City Champaign | State IL | Zip Code 61820 | Transaction ID : SE.134856 |
| Purpose of Expenditure Flyers | | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 13 / 2015 |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 14420.92 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|--------------------|---|---|
| Full Name of Payee Minuteman Press | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 13 / 2015 | |
| Mailing Address 905 S. Neil St. Ste. B | | Amount 300.00 | |
| City Champaign | State IL | Zip Code 61820 | Transaction ID : SE.134857 |
| Purpose of Expenditure Flyers | | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 13 / 2015 |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 14720.92 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 1503.29 |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
08 / 20 / 2015

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 63 OF 84
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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | FEC IDENTIFICATION NUMBER ▼ C C00402800 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | | |
|--|-----------------------------|---|---|
| Full Name of Payee Minuteman Press | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 15 / 2015 | |
| Mailing Address 905 S. Neil St. Ste. B | | Amount 175.00 | |
| City Champaign | State IL | Zip Code 61820 | Transaction ID : SE.134858 |
| Purpose of Expenditure Flyers | Category/Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 15 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 15366.75 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|--|-----------------------------|---|---|
| Full Name of Payee Minuteman Press | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 15 / 2015 | |
| Mailing Address 905 S. Neil St. Ste. B | | Amount 340.00 | |
| City Champaign | State IL | Zip Code 61820 | Transaction ID : SE.134859 |
| Purpose of Expenditure Flyers | Category/Type 004 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 15 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 15706.75 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 515.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 20 / 2015

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|---|--------------------|--|---|--|
| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 36.65 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134888 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8588.44 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 02 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 67.15 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134889 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 02 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8655.59 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 103.80 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2015 |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 02 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 16.11 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134890 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 02 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8671.70 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 06 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 46.30 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134894 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 06 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8718.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 62.41 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYY 08 / 20 / 2015 |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 06 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 56.61 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134895 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 06 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8774.61 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 06 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 23.81 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134896 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 06 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 8798.42 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 80.42 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYYYY 08 / 20 / 2015 |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 07 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 7.62 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134897 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 07 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 8806.04 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 21.80 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134898 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 09 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 9374.17 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 29.42 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYY 08 / 20 / 2015 |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 11.30 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134899 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 09 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 9385.47 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 22.30 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134900 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 09 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 9407.77 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 33.60 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYY 08 / 20 / 2015 |

| | | | |
|---|-------------------|--|--|
| Full Name of Payee USPS | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 13 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | Amount 54.66 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134902 |
| Purpose of Expenditure Postage | Category/ Type | 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 13 / 2015 |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State: |
| Calendar Year-To-Date Per Election for Office Sought | | 14775.58 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |

| | | |
|--|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | ▶ | 159.23 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | ▶ | |
| (c) TOTAL Independent Expenditures..... | ▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00402800</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 13 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 12.62 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134903 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 13 / 2015 | |
| Purpose of Expenditure Postage | | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> Senate State: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 14788.20 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 14 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 51.85 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134904 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 07 / 14 / 2015 | |
| Purpose of Expenditure Postage | | Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> | | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 15160.05 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 64.47 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <div style="border-top: 1px solid black; width: 100%;"></div> <i>Kimberly Buchan</i> | | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 08 / 20 / 2015 | |
| FEC Schedule E (Form 3X) Rev. 09/2013 | | | | |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination 07 / 14 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 31.70 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134905 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation 07 / 14 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 15191.75 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination 07 / 15 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 5.05 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134906 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation 07 / 15 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 15711.80 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 36.75 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | Date 08 / 20 / 2015 | | |
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ITEMIZED INDEPENDENT EXPENDITURESPAGE 72 OF 84
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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 15 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 11.30 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134907 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 15 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 15723.10 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 20 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 81.15 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134908 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 20 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 15804.25 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 92.45 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | Date MM / DD / YYYY 08 / 20 / 2015 | | |
| [Electronically Filed] | | | | |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 20 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 81.15 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134909 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 20 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 15885.40 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 21 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 53.01 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134910 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 21 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 15938.41 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 134.16 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] | | Date MM / DD / YYYYYY 08 / 20 / 2015 |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 21 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 8.89 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134911 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 21 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 15947.30 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 22 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 12.90 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134912 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 22 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | 15960.20 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 21.79 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2015 | | |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 43.65 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134913 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 22 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 16003.85 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 24 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 23.60 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134914 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 24 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19218.70 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 67.25 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | Date MM / DD / YYYY 08 / 20 / 2015 | | |
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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 24 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 5.70 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134915 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 24 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19224.40 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 27 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 57.50 | |
| City Grand Rapids | State MI | Zip Code 49505 | Transaction ID : SE.134916 | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYY 07 / 27 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19281.90 | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 63.20 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | | Date MM / DD / YYYY 08 / 20 / 2015 | |
| [Electronically Filed] | | | | |

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | | FEC IDENTIFICATION NUMBER ▼ C C00402800 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY | | | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 28 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 17.90 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134917 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 28 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19299.80 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| Full Name of Payee USPS | | | Date of Public Distribution/Dissemination MM / DD / YYYYYY 07 / 29 / 2015 | |
| Mailing Address 1765 3 Mile Rd. NE | | | Amount 25.65 | |
| City Grand Rapids State MI Zip Code 49505 | | Transaction ID : SE.134918 | | |
| Purpose of Expenditure Postage | | Category/Type 001 | Date of Disbursement or Obligation MM / DD / YYYYYY 07 / 29 / 2015 | |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 19325.45 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | | | 43.55 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | | | | |
| (c) TOTAL Independent Expenditures.....▶ | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Signature <i>Kimberly Buchan</i> | | Date MM / DD / YYYYYY 08 / 20 / 2015 | | |
| [Electronically Filed] | | | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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| NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA | | FEC IDENTIFICATION NUMBER ▼ C C00402800 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|--|-----------------------------|--|
| Full Name of Payee USPS | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2015 |
| Mailing Address 1765 3 Mile Rd. NE | | Amount 5.05 |
| City Grand Rapids | State MI | Zip Code 49505 |
| Purpose of Expenditure Postage | Category/Type 001 | Transaction ID : SE.134919 Date of Disbursement or Obligation MM / DD / YYYY 07 / 31 / 2015 |
| Name of Federal Candidate BERNARD SANDERS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 19330.50 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

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| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY |
| Mailing Address | | Amount |
| City | State | Zip Code |
| Purpose of Expenditure | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 5.05 |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 10778.71 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan
Signature

[Electronically Filed]

Date **08 / 20 / 2015**

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Transaction ID : H1.134926

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒ **or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 80 OF 84

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

NAME OF ACCOUNT

Progressive Vote NF DBA Progressive Democrats
of America NF

DATE OF RECEIPT

MM / DD / YYYY
07 / 31 / 2015

TOTAL AMOUNT TRANSFERRED

5000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5000.00

Transaction ID : H3.134925

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

5000.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

5000.00

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| | | | | | | | | |
|--|--|-------------|-----------------------------------|-------------------|--|--|--|--|
| A. Full Name (Last, First, Middle Initial) conor boylan | | | Transaction ID : H4.134801 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1502 W Sunnyside Ave | | | | | | | | |
| City CHICAGO | | State IL | | Zip Code 60640 | | | | |
| Purpose of Disbursement: July Salary | | | | | | Allocated Activity or Event Year-To-Date 73000.00 | | |
| Activity or Event Identifier: Administrative | | | | | | Date <input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2015"/> | | |
| FEDERAL SHARE | | | + | | | NONFEDERAL SHARE | | |
| 1000.00 | | | | | | 2000.00 | | |

| | | | | | | | | |
|---|--|-------------|-----------------------------------|-------------------|--|--|--|--|
| B. Full Name (Last, First, Middle Initial) Kimberly Buchan | | | Transaction ID : H4.134841 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 3037 Crisfield Dr. NE | | | | | | | | |
| City Grand Rapids | | State MI | | Zip Code 49525 | | | | |
| Purpose of Disbursement: July Salary | | | | | | Allocated Activity or Event Year-To-Date 74575.00 | | |
| Activity or Event Identifier: Administrative | | | | | | Date <input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2015"/> | | |
| FEDERAL SHARE | | | + | | | NONFEDERAL SHARE | | |
| 787.50 | | | | | | 1575.00 | | |

| | | | | | | | | |
|--|--|-------------|-----------------------------------|-------------------|--|--|--|--|
| C. Full Name (Last, First, Middle Initial) conor boylan | | | Transaction ID : H4.134802 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1502 W Sunnyside Ave | | | | | | | | |
| City CHICAGO | | State IL | | Zip Code 60640 | | | | |
| Purpose of Disbursement: July Salary | | | | | | Allocated Activity or Event Year-To-Date 76575.00 | | |
| Activity or Event Identifier: Administrative | | | | | | Date <input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> | | |
| FEDERAL SHARE | | | + | | | NONFEDERAL SHARE | | |
| 1000.00 | | | | | | 2000.00 | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2787.50 | | 2787.50 | | 5575.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| | | | | | |
|---|-------------|-----------------------------------|------------------|---|--------------|
| A. Full Name (Last, First, Middle Initial) Janis Kay | | Transaction ID : H4.134830 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 1902 N. Meyers Rd. | | | | | |
| City Liberty Lake | State WA | Zip Code 99016 | | | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 76850.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 137.50 | | | 137.50 | | 275.00 |

| | | | | | |
|---|-------------|-----------------------------------|------------------|---|--------------|
| B. Full Name (Last, First, Middle Initial) Judith Hess | | Transaction ID : H4.134840 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 1012 E. Manhattan Ave. | | | | | |
| City Fresno | State CA | Zip Code 93720 | | | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 77350.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 250.00 | | | 250.00 | | 500.00 |

| | | | | | |
|---|-------------|-----------------------------------|------------------|---|--------------|
| C. Full Name (Last, First, Middle Initial) Kimberly Buchan | | Transaction ID : H4.134842 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 3037 Crisfield Dr. NE | | | | | |
| City Grand Rapids | State MI | Zip Code 49525 | | | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 77850.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 250.00 | | | 250.00 | | 500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 637.50 | | 637.50 | | 1275.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 83 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| | | | | | |
|--|-------------|-----------------------------------|------------------|---|--------------|
| A. Full Name (Last, First, Middle Initial) Michael D. Fox | | Transaction ID : H4.134854 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 719 52nd St. N | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City St. Petersburg | State FL | Zip Code 33710 | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 78850.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 500.00 | | | 500.00 | | 1000.00 |

| | | | | | |
|--|-------------|-----------------------------------|------------------|---|--------------|
| B. Full Name (Last, First, Middle Initial) Mike Hersh | | Transaction ID : H4.134855 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 12008 Milton St. | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City Wheaton | State MD | Zip Code 20902 | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 79425.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 287.50 | | | 287.50 | | 575.00 |

| | | | | | |
|--|-------------|-----------------------------------|------------------|---|--------------|
| C. Full Name (Last, First, Middle Initial) Steve Cobble | | Transaction ID : H4.134876 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 609 Irving St. NW | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City Washington | State DC | Zip Code 20010 | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: July Salary | | | | Allocated Activity or Event Year-To-Date 79925.00 | |
| Activity or Event Identifier: Administrative | | Category/ Type | | Date 07 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 250.00 | | | 250.00 | | 500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1037.50 | | 1037.50 | | 2075.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 84 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

| | | | | | | | | |
|---|-------------|-------------------|-----------------------------------|------------------|--|--|---|--------------|
| A. Full Name (Last, First, Middle Initial) Kimberly Buchan | | | Transaction ID : H4.134843 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 3037 Crisfield Dr. NE | | | | | | Allocated Activity or Event Year-To-Date 81000.00 | | |
| City Grand Rapids | State MI | Zip Code 49525 | | | | Date MM / DD / YYYY 07 / 31 / 2015 | | |
| Purpose of Disbursement: July Salary | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Category/ Type | | | | | |
| FEDERAL SHARE | | | + | NONFEDERAL SHARE | | | = | TOTAL AMOUNT |
| 537.50 | | | | 537.50 | | | | 1075.00 |

| | | | | | | | | |
|---|-------|----------|-------------------|------------------|--|---|---|--------------|
| B. Full Name (Last, First, Middle Initial) | | | | | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address | | | | | | Allocated Activity or Event Year-To-Date | | |
| City | State | Zip Code | | | | Date MM / DD / YYYY | | |
| Purpose of Disbursement: | | | | | | | | |
| Activity or Event Identifier: | | | Category/ Type | | | | | |
| FEDERAL SHARE | | | + | NONFEDERAL SHARE | | | = | TOTAL AMOUNT |
| | | | | | | | | |

| | | | | | | | | |
|---|-------|----------|-------------------|------------------|--|---|---|--------------|
| C. Full Name (Last, First, Middle Initial) | | | | | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address | | | | | | Allocated Activity or Event Year-To-Date | | |
| City | State | Zip Code | | | | Date MM / DD / YYYY | | |
| Purpose of Disbursement: | | | | | | | | |
| Activity or Event Identifier: | | | Category/ Type | | | | | |
| FEDERAL SHARE | | | + | NONFEDERAL SHARE | | | = | TOTAL AMOUNT |
| | | | | | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 537.50 | | 537.50 | | 1075.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| 5000.00 | | 5000.00 | | 10000.00 |